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ABSTRACT OF THE INVENTION

A method of inserting a multi-lumen catheter assembly. First, an incision is made near the area to be catheterized. The proximal portion of the multi-lumen catheter tube is then inserted into the area to be catheterized. A subcutaneous tunnel is created, and the first end of the tunnel is near the incision. The catheter tube is then routed through the subcutaneous tunnel and pulled tube through a second end of the subcutaneous tunnel. The hub body is then securely attached to the catheter tube by connecting the connection cover to the hub body by threaded engagement. In a preferred embodiment the hub body is attached to the catheter tube by backfitting the connection cover over the catheter tube. A compression sleeve is also backfit over the catheter tube. The cannulae of the hub body are inserted into the lumens of the catheter tube to create fluid communication therebetween. The connection between the cannulae and the first and the catheter tube is compressed by sliding the compression sleeve over the cannulae that have been inserted into the catheter tube.